

FE6AN026

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER

2016 APR -5 PM 12: 50

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2.	FEC ID	ENTIFICATION N	UMBER '	-	CITY▲			STATE	A	ZIP C	ODE 🛦
	CO.	05,4,7,3	9.8		3. IS THI REPO	11/2	NEW (N) OI	R []	AMEN (A)	NDED	
4.	(Choose	OF REPORT One) arterly Reports:		onthly port ue On:	Feb 20 (M	A3)	May 20 (M	6)	Aug 20 Sep 20	(M9)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
		April 15 Quarterly Report (c July 15 Quarterly Report (c October 15 Quarterly Report (c	Q2) (C)	12-Day PRE-Electio Report for the	77	Primary (1 Conventio			Oct 20 eneral (12 pecial (128	(G)	Jan 31 (YE) Runoff (12R)
		January 31 Year-End Report (*) July 31 Mid-Year Report (Non-election Year Only) (MY)	YE) (d)	30-Day	election on	General (3	, D D D D D D D D D D D D D D D D D D D	/ Provide Ru	unoff (30R	in the State	6 7
	0	Termination Report		Report for the	ne: lection on	M M	/ [54-5]		***	in the State	
5.	Covering	Period O.		20	1.6	through	0	3 3		2.0.1.6	
		I have examined the Name of Treasure			st of my k	nowledge and		true, corre		omplete.	
Sign	ature of	Treasurer <u>//</u>	Til	21/	/ /		-	Date	04	09	2016
NOT	E: Submi	ssion of false, erron	eous, or in	complete inform	nation may	subject the p	erson signing	this Repo	rt to the p	penalties of 2	U.S.C. §437g.
 	Off Us Or	se								FEC FOF Rev. 12/2	

2016 · 04 · 05 · 05 · 00060551

SUMMARY PAGE OF RECEIPTS AND DISRUISSEMENTS

FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name Ancrican Association of	1 Private Lenders PAC	(APL-PAC)
	0.1 / 2.1. U To	W-W / D-D / Y-Y-Y-Y
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1,		0.00
(b) Cash on Hand at Beginning of Reporting Period		•
(c) Total Receipts (from Line 19)		0.0.0
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		
7. Total Disbursements (from Line 31)		0.00
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	0.00	0,00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0,00	
Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
This committee has qualified as a mul	lticandidate committee. (see FEC FORM 1M)	
	For further information contact:	
	Federal Election Commission 999 E Street, NW Washington, DC 20463	
	Toll Free 800-424-9530 Local 202-694-1100	

FE6AN026

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 06/2004)	FEC	Form	3X	(Rev.	06/2004)
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of Receipts

Page 3

v	Vrite or Type Committee Name		2 / /2/ 2/4:)
1	American Association	of Printe Cade	-
F	Report Covering the Period: From:	1 01 2016	To: 03 31 2016
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees	-	familiario and resident and an extended to the second
	(i) Itemized (use Schedule A)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, 0.00
	(ii) Unitemized	000	0.00
	(iii) TOTAL (add	000	000
	Lines 11(a)(i) and (ii)		,,
	(b) Political Party Committees		0.00
	(c) Other Political Committees	000	000
	(such as PACs)(d) Total Contributions (add Lines		
	11(a)(iii), (b), and (c)) (Carry		0.00
	Totals to Line 33, page 5)▶	0.0.0	000
12.	Transfers From Affiliated/Other Party Committees	000	000
13.	All Loans Received	0.00	000
14	Loan Repayments Received	0.00	0.00
	Offsets To Operating Expenditures		المستخدمة والمستحددة المستحددة
	(Refunds, Rebates, etc.)		
16	(Carry Totals to Line 37, page 5) Refunds of Contributions Made	, , , , , , ,	0,00
10.	to Federal Candidates and Other		
	Political Committees	, 000	000
17.	Other Federal Receipts (Dividends, Interest, etc.)	600	000
18.	Transfers from Non-Federal and Levin Funds		0.00
	(a) Non-Federal Account		2001
	(from Schedule H3)	0.00	000
	(b) Levin Funds (from Schedule H5)	000	000
	(a) Total Transfers (add 19/a) and 19/b))		0001
	(c) Total Transfers (add 18(a) and 18(b))		10-00-01-01-01-01-01-01-01-01-01-01-01-0
19.	Total Receipts (add Lines 11(d),	والمعارب	The section of the se
	12, 13, 14, 15, 16, 17, and 18(c))▶	0.0.0	0.00
20.	Total Federal Receipts	The Control of the Co	in the state of th
	(subtract Line 18(c) from Line 19) ▶	0.00	0.00
		and the companies of th	and the second control of the second

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Leading of any and any and any alternative relative	Partinal Teal-to-Date
	(i) Federal Share	0.00	000
	(ii) Non-Federal Share	, 0.00	<u> </u>
	(b) Other Federal Operating Expenditures	000	000
	(c) Total Operating Expenditures		
	(add 21(a)(i), (a)(ii), and (b))▶	000	600
22.	Transfers to Affiliated/Other Party	00.00	000
23.	CommitteesContributions to	000	000
	Federal Candidates/Committees and Other Political Committees	000	000
24.	Independent Expenditures		
25	(use Schedule E)Coordinated Party Expenditures	, 000	000
25.	(2 U.S.C. §441a(d)) (use Schedule F)	000	000
	(use Schedule F)		
26.	Loan Repayments Made	000	000
	Loans Made Refunds of Contributions To:	000	000
	(a) Individuals/Persons Other Than Political Committees	000	000
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees	000	000
	(such as PACs)		000
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	000	
00	Other Dishuraness	000	600
29.	Other Disbursements		000
30.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6)	000	CVV I
	(i) Federal Share		
	(ii) "Levin" Share	000	000
	(b) Federal Election Activity Paid Entirely	000	000
	With Federal Funds	000	000
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	000	$\mathcal{O}(0)$
		has been been been been been been been bee	had a should be the should be the should be sh
31.	Total Disbursements (add Lines 21(c), 22,	e magazanganagan ing magazangan ng ming pangsangan ng	and the section of the section of the section of
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	C00	000
32.	Total Federal Disbursements		The state of the s
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		Secured-seculoscopic responsaciones de la companione de l
	from Line 31)	000	000
		eras or a meneri aleania delle Carristenia a Antiche delle delle delle delle dalle delle delle delle delle del	Figure 12.3 (ARIS) (EXCLUSIVE E. L. ARISTINAS (ARISTRAS PARTIES CONTRACT ARISTINS CONTRACT CONTRACT ARISTINS CONTRACT CO

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5 III. Net Contributions/Operating Ex-COLUMN A **COLUMN B Total This Period** Calendar Year-to-Date penditures 33. Total Contributions (other than loans) 000 (from Line 11(d), page 3) 34. Total Contribution Refunds (from Line 28(d))..... 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures (from Line 15, page 3)..... 38. Net Operating Expenditures (subtract Line 37 from Line 36)

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE / OF /		
ΙT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)		
••			Detailed Summary Page	11a 11b 11c 12		
_				13 14 15 16 17		
A	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any pe address of any political committee	to solicit contributions from such committee.		
K	NAME OF COMMITTEE (In Full)		action of any pointed community			
		0	~ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	7.14 (12) 7.1()		
V	American Association	n 04	Private Lenders	PHC (APL-PHC)		
	Full Name (Last, First, Middle Initial)					
A.				Date of Receipt		
	Mailing Address			M-M- / -0-20- / -7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7-7		
	Oth.	Ctoto	7:- Code	→ become b		
	City	State	Zip Code	Amount of Foot Bessiet this Besied		
				Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.					
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	Name of Employer	Occupation				
		<u> </u>		4		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼			
	Other (specify)					
	Cutof (specify) \		<u> </u>			
_	Full Name (Last, First, Middle Initial)					
В.				Date of Receipt		
	Mailing Address			Marw / Logo / Assarta		
	City	State	Zip Code			
				Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C '				
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	Name of Employer	Occupation		}		
				1		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼			
	Other (specify)					
	cine. (speeny) \	in the sales				
	Full Name (Last, First, Middle Initial)			<u> </u>		
C.				Date of Receipt		
	Mailing Address			Mary 1 Dag 1 Aracasas		
				المناهدا المسادا		
	City	State	Zip Code			
		parter and	Open Total And Mark Control (Annual Annual A	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.					
		بمراضعة المسلما	డించికి - మాయ	Brown on the disease who disease a track National		
		Occupation				
		· _ · · · · · · · · · · · · · · · · · ·	4			
	Receipt For: Primary General	Aggregate `	Year-to-Date ▼			
	Other (specify)	1 4 1 2 mg - mg	family of matery to start and and			
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s	UBTOTAL of Receipts This Page (optional)			0.00		
\vdash			<u> </u>	A CALL TO SEE THE CONTRACT OF THE CONTRACT OF THE CONTRACT OF		
Ιt	OTAL This Period (last page this line number o	nlv)		O(O(1)		

S	CHEDULE B (FEC Form 3X)	FOR LINE			NUMBER: PAGE / OF /	
łŢ	EMIZED DISBURSEMENTS		arate schedule(s category of the	(check only	y one)	
			Summary Page	21b 27	22 23 24 25 26 28a 28b 28c 29 30b	
	ny information copied from such Reports and Statem					
o	r for commercial purposes, other than using the nam					
	NAME OF COMMITTEE (In Full) American Association Full Name (Last, First, Middle Initial)	0	3 1	/ .	246 (124 246)	
Z	American Association	01	Private	Le-de	RS PAC (APC- PVAC)	
A.	Full Name (Last, First, Middle Initial)				Date of Disbursement	
, .					M / 6 6 / / 7 F / 7 F / F	
	Mailing Address					
	City	tate	Zip Code			
	Purpose of Disbursement	_			Amount of Each Disbursement this Period	
	Candidate Name			Category/ Type		
	Office Sought: House Disbursem					
	L-J 1 1	Primary Other (spec	☐ General			
	State: District:		· · ·			
В.	Full Name (Last, First, Middle Initial)				Date of Disbursement	
Ь.					Way / Dad / Yayayay	
	Mailing Address				السالسالسيا	
	City	tate	Zip Code			
	Purpose of Disbursement				Amount of Each Disbursement this Period	
	Candidate Name			Category/ Type		
	Office Sought: House Disburseme	ent For:				
		Primary Other (spec	General			
	State: District:	, (opco	∀			
_	Full Name (Last, First, Middle Initial)					
.ت					Date of Disbursement	
	Mailing Address					
	City	ate	Zip Code			
	Purpose of Disbursement					
Candidate Name				Category/	Amount of Each Disbursement this Period	
	Office Sought: House Disburseme	ent For:		Туре	hands the think and the think at the test and	
		rimary	General			
	State: President C	Other (speci	iy) ▼			
s	UBTOTAL of Disbursements This Page (optional)				0.00	
						
T	OTAL This Period (last page this line number only)	•••••	•••••	·····	0.00	

SCHEDULE C	(FEC	Form	3X)
LOANS			

PAGE OF Use separate schedule(s) for each category of the FOR LINE 13 OF FORM 3X **Detailed Summary Page** NAME OF COMMITTEE (In Full) **Primary** General Mailing Address Other (specify) City State ZIP Code Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date TERMS Interest Rate Secured: Date Incurred Date Due % (apr) Yes List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount City State ZIP Code Guaranteed Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Mailing Address Occupation Amount City State ZIP Code Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation **Amount** State ZIP Code Guaranteed City Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount City State ZIP Code Guaranteed Outstanding: SUBTOTALS This Period This Page (optional)..... TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page / of Schedule

Federal Election Commission, Washington, D.C. 20463			Page or scriedule C
NAME OF COMMITTEE (In Full)		FEC ID	ENTIFICATION NUMBER
	1 1 2 (m)	V2 10/0	0.5.4.7.3.98
American Association of Priva	teledors YAC (APC-	PAC)	0,3,7,1,2,1,01
LENDING INSTITUTION (LENDER)	Amount of Loan		Interest Rate (APR)
Full Name		- Server	Section of the County
	Carolination Carolinate admid and and	-Curband	and the Contraction of the
Mailing Address		M-W /	D D / Y VY Y Y
	Date Incurred or Established	ا ليسا ا	
City State Zip Code	Date Due	M - M /	LATERITY / LATER
	<u> </u>		
A. Has loan been restructured? No Yes	If yes, date originally incurred	M - W /	D V D / Y V V V V V
B. If line of credit,	Total		
Amount of this Draw:	Outstanding Balance:		
C. Are other parties secondarily liable for the debt incur No Yes (Endorsers and guarantors m	red? nust be reported on Schedule C.)		
D. Are any of the following pledged as collateral for the		What is the valu	e of this collateral?
property, goods, negotiable instruments, certificates o stocks, accounts receivable, cash on deposit, or othe		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
No Yes If yes, specify:		المستنسبة المستنسبة	
			have a perfected security
E. Are any future contributions or future receipts of inter		interest in it?	No Yes
	specify:	What is the estir	
	Location of account:		
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of Location		
Date account established:	Address:		
<u>መውመን</u> / የመውሰን / የማጭገኝ ተላማማኝ	City, State, Zip:	s	
E. If poither of the types of colleteral described shave we		mount pladged	topo not equal or evened
F. If neither of the types of collateral described above wa the loan amount, state the basis upon which this loan			
		•	
G. COMMITTEE TREASURER		DATE	
Typed Name Rick Abel Asst	Treasurer	M-M/	2016
Signature		0910	7 [201,6]
H. Attach a signed copy of the loan agreement.	·		
I. TO BE SIGNED BY THE LENDING INSTITUTION:			
 To the best of this institution's knowledge, the te are accurate as stated above. 	erms of the loan and other informa	ation regarding th	ne extension of the loan
The loan was made on terms and conditions (in similar extensions of credit to other borrowers or similar extensions of credit to other borrowers or similar extensions.)		orable at the time	e than those imposed for
III. This institution is aware of the requirement that	a loan must be made on a basis		epayment, and has
complied with the requirements set forth at 11 C AUTHORIZED REPRESENTATIVE	CFR 100.82 and 100.142 in makin	g this loan. DATE	
Typed Name		DATE FW M 7 / E	
Signature	tle		
1			

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

(Use separate schedule(s) for each numbered line) PAGE OF

DED 12 WIN	OBLIGATIONS		for each	(check only one)	П9
Excluding Loa	ans	numbered line)	(5//55// 5/// 5///	10	
NAME OF COM	MITTEE (In Full)			<u>-</u>	
American		hivate Lenders P.	AC (APL	PAC)	
A. Full Name	e (Last, First, Middle Initial) of Debt			Debt (Purpose):	
Mailing Addre	ess				
<u> </u>	Otali.	7:- 0:-1:-			
City	State	Zip Code			
Outstanding	g Balance Beginning This Period				
Amo	ount Incurred This Period	Payment This Period	Outstand	ing Balance at Close of	This Period
	Andreas And Louis	be described and and			
	23-4-23-43-4-23-4		لـــــ		
B. Full Name	(Last, First, Middle Initial) of Debto	r or Creditor	Nature of [Debt (Purpose):	·
Mailing Addre	00				
Walling Addres	33				
City	State	Zip Code			
Outstanding	Balance Beginning This Period				
Oddanana	Dalance Deginning Triis Tende				
<u> </u>					
	ount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of	This Period
C. Full Name	e (Last, First, Middle Initial) of Debte	or or Creditor	Nature of D	Pebt (Purpose):	
Mailing Addres					
lineg / tau/ot					
City		State Zip Code			ľ
Outstanding	Balance Beginning This Period				
	Marke head about after the	Dayman This Daylad	0.444	no Delegge at Olega of	This Desired
	punt Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of	Inis Period
Lat mind	The latter of the first week to be a second	ريان ماکيميان دوالور (اگريزيان دولور دولور)		مانية المنازل بالمانية بداعه الكنية	المنديد
			F-007-7-100-7-0		- Control - Control - Control
1) SUBTOTALS	This Period This Page (optional)		•		200
2) TOTALS This	Period (last page this line number	only)	<u>▶</u> [,	Stanta Luito	וסטנ
3) TOTAL OUTS	STANDING LOANS from Schedule	C (last page only)	>		2001
		C (last page only)line of Summary Page (last page on	— Ì		200

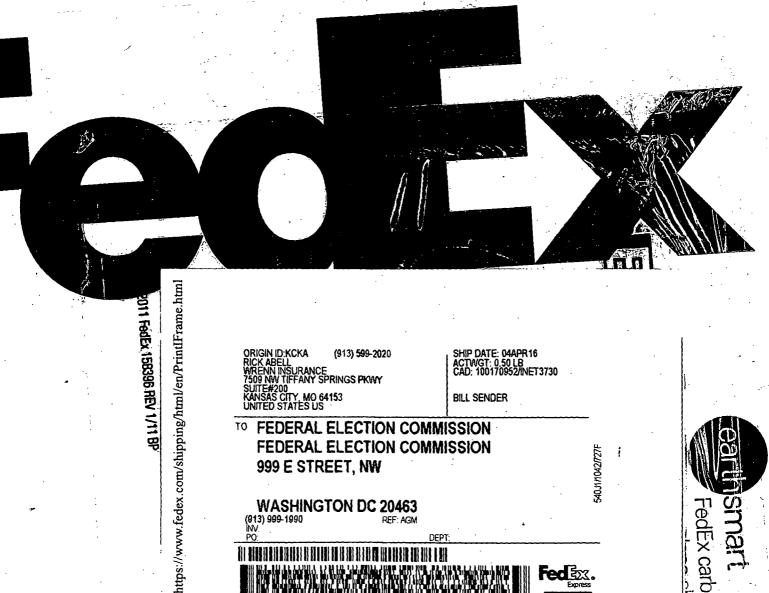
SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

ITEMIZED INDEPENDENT EXPENDITURES	PAGE OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
American Association of Printeleders PK (APL-PA	0 000547398
Check if 24-hour report 48-hour report New report Amends report filed on	
Full Name of Payee Da	ate of Public Distribution/Dissemination
	MIKI / DIO / YIYIY
Mailing Address An	nount
City State Zip Code	
	ate of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M M / D D / V V V V
Name of Federal Candidate Support Office Soci	ught: House District:
Oppose Pre	sident Senate State:
Calendar Year-To-Date Per Election for Office Sought Disbursen	nent For: Primary General Other (specify) ▶
Full Name of Payee Da	ate of Public Distribution/Dissemination
	Waw / DED / Askedad
Mailing Address	nount
City State Zip Code	-660366036666666666666
Burnage of Expanditure	ite of Disbursement or Obligation
Category/ Type	() () () () () () () () () ()
Name of Federal Candidate Support Office Sou	ught: House District:
Oppose Pre	sident Senate State:
Calendar Year-To-Date Per Election for Office Sought Disbursen	nent For: Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	000
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Signature Date O.S.	09/2016

SCHEDULE F (FEC Form 3X) ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE

10	ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE PAGE / OF /						
(2	U.S.C. §441a(d)) (To be used only by Political Committees in the General Election) FOR LINE 25 OF FORM 3X						
N/	AME OF COMMITTEE (In Full)			/	. `		
	tmerican Association		ivate Lenders PAC	. (APL- <i>YH</i>	4()		
Ha	as your committee been designated to ma ordinated expenditures by a political party	ake	Full Name of Subordinate Committee	96			
(4)	YES NO	y committee:					
lf '	YES, name the designating committee:		Mailing Address				
			City	Stat	te ŽIP Code		
	Full Name (Last, First, Middle Initial) of	Each Payee		Purpose of Expe	enditure		
	! :				Category/		
	Mailing Address				Type		
	City	State	Zip Code	Date			
	City	Glaic	Zip Code				
	Name of Federal Candidate Supported	Office Sough	<u> </u>	Amount			
			Senate District:	-			
	Aggregate General Election	, 6 4 4	1 70300 Titali .	<u> </u>			
	Expenditure for this Candidate						
	Full Name (Last, First, Middle Initial) of	Each Payee		Purpose of Expe	nditure		
	Mailing Address		,	_	Category/ Type		
	O'th.		7:- Code	Date			
	City	State	Zip Code		Y Y Y Y Y Y Y		
	Name of Federal Candidate Supported	Office Sought	<u>}</u>	Amount			
			Senate District:				
	Aggregate General Election	4					
	Expenditure for this Candidate						
	Full Name (Last, First, Middle Initial) of	Each Payee	<u></u> -	Purpose of Exper	nditure		
- 1					السيا		
ł	Mailing Address		· · · · · · · · · · · · · · · · · · ·	-	Category/ Type		
		····		Date			
ı	City	State	Zip Code	Market / F	A D A V LA A A A A A A A A A A A A A A A A		
ŀ	Name of Federal Candidate Supported	Office Sought	it: House State:	. Amount	And backmakers		
			Senate District:	Amount			
ŀ			Presidential				
-	Aggregate General Election Expenditure for this Candidate ▶						
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